



FEE TRANSMITTAL

FEE TRANSMITTAL		Docket No.		4004-025-30										
		Serial No.		09/926,519										
		Filing Date		November 30, 2001										
		Inventor(s)		Etienne DEGAND, et al.										
		Group Art Unit		3742										
TOTAL AMOUNT OF PAYMENT		\$440.00		Examiner		John A. Jeffery								
1. <input type="checkbox"/> Applicant claims small entity status. <input checked="" type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.						FEE CALCULATION (continued)								
2. <input checked="" type="checkbox"/> Check enclosed.						3. ADDITIONAL FEES								
						Large Entity		Small Entity		Fee Description				
						Fee Code	Fee (\$)	Fee Code	Fee (\$)			Fee Paid		
FEE CALCULATION						1051	130	2051	65	Surcharge-late filing fee or oath				
1. BASIC FILING FEE						1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet				
Large Entity		Small Entity		Fee Description		1053	130	1053	130	Non-English Specification				
Fee Code	Fee (\$)	Fee Code	Fee (\$)			Fee Paid	1251	110	2251	55	1-mo. ext. of time	110.00		
1001	770	2001	385	Utility filing fee			1252	420	2252	210	2-mo. ext. of time			
1002	340	2002	170	Design filing fee			1253	950	2253	475	3-mo. ext. of time			
1003	520	2003	260	Plant filing fee			1254	1480	2254	740	4-mo. ext. of time			
1004	770	2004	385	Reissue filing fee			1255	2010	2255	1005	5-mo. ext. of time			
1005	160	2005	80	Provisional filing fee			1401	330	2401	165	Notice of Appeal			
SUBTOTAL (1)						\$0.00	1402	330	2402	165	Appeal Brief	330.00		
2. EXTRA CLAIM FEES							1403	290	2403	145	Request for Oral Hearing			
tot. claims			-	20*	= 0	x \$18	=	0	1501	1330	2501	665	Utility/Reissue Issue Fee	
ind. claims			-	3*	= 0	x \$86	=	0	1502	480	2502	240	Design Issue Fee	
<input type="checkbox"/> Multiple Dependent Claims					\$290	=			1504	300	1504	300	Publication Fee	
Large Entity		Small Entity		Fee Description		8001	3	8001	3	Advance Copy of Patent				
Fee Code	Fee (\$)	Fee Code	Fee (\$)			1460	130	1460	130	Petitions to the Commissioner				
1202	18	2202	9	Claims in excess of 20		1806	180	1806	180	IDS Submission				
1201	86	2201	43	Independent claims in excess of 3		8021	40	8021	40	Assignment recordation				
1203	290	2203	145	Multiple dependent claim, if not paid		1801	770	2801	385	For Filing RCE				
1204	84	2204	43	*Reissue independent claims over original patent		1814	110	2814	55	Terminal Disclaimer				
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent		OTHER (indicate below):								
SUBTOTAL (2)						\$0.00								
* or number previously paid, if greater; For Reissues, see above						SUBTOTAL (3)						\$440.00		

Name	Jerold I. Schneider		Registration No.	24,765		
Signature			Date		Telephone	202-861-3900
Name			Registration No.			